# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
ADMINISTRATIVE DIVISION
NOV 15 11 19 AM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Academy of Ophthalmology, Inc. Political Committee (OPTHPAC)

ADDRESS (number and street) [ ] Check if different than previously reported
655 Beach Street

CITY, STATE and ZIP CODE
San Francisco, CA 94109

2. FEC IDENTIFICATION NUMBER
C00196146

3. [ ] This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

## 4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

| | | |
|---|---|---|
| [ ] February 20 | [ ] June 20 | [ ] October 20 |
| [ ] March 20 | [ ] July 20 | [X] November 20 |
| [ ] April 20 | [ ] August 20 | [ ] December 20 |
| [ ] May 20 | [ ] September 20 | [ ] January 31 |

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [ ] NO

| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 5 Covering Period 10/01/93 through 10/31/93 | | |
| 6 (a) Cash on Hand January 1, 1993 | | $ 173,447.71 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 239,487.56 | |
| (c) Total Receipts (from Line 19) | $ 51,755.39 | $ 345,964.36 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 291,242.95 | $ 519,412.07 |
| 7 Total Disbursements (from Line 30) | $ 9,018.25 | $ 237,187.37 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 282,224.70 | $ 282,224.70 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0 | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800 424-9530
Local 202-376-3120

*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer
Paula E. Lent

Signature of Treasurer
Paula E Lent Treasurer

Date 11/08/93

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g

FEC FORM 3X
(revised 1/1/91)

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# DETAILED SUMMARY PAGE
## OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 10/01/93 TO 10/31/93

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year |
|---|---|---|
| 11. Contributions (other than loans) From: | | |
| a. Individual/Persons Other Than Political Committees | | |
| i. Itemized (use Schedule A) | 10,560.00 | 246,996.66 |
| ii. Unitemized | 40,950.00 | 96,378.04 |
| iii. Total (add i and ii) ➤ | 51,510.00 | 343,374.70 |
| b. Political Party Committees | 0 | 0 |
| c. Other Political Committees (such as PACs) | 0 | 0 |
| d. Total Contributions (add a iii, b and c) ➤ | 51,510.00 | 343,374.70 |
| 12. Transfers From Affiliated/Other Party Committees | 0 | 0 |
| 13. All Loans Received | 0 | 0 |
| 14. Loan Repayments Received | 0 | 0 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0 | 21.40 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0 | 0 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 245.39 | 2,568.26 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0 | 0 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 51,755.39 | 345,964.36 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 51,755.39 | 345,964.36 |
| **II. Disbursements** | | |
| 21. Operating Expenditures: | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| i. Federal Share | 0 | 0 |
| ii. Non-Federal Share | 0 | 0 |
| b. Other Federal Operating Expenditures | 1,418.25 | 11,037.37 |
| c. Total Operating Expenditures (Add a i, a ii, and b) ➤ | 1,418.25 | 11,037.37 |
| 22. Transfers to Affiliated/Other Party Committees | 0 | 0 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 5,500.00 | 214,500.00 |
| 24. Independent Expenditures (use Schedule E) | 0 | 0 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0 | 0 |
| 26. Loan Repayments Made | 0 | 0 |
| 27. Loans Made | 0 | 0 |
| 28. Refunds of Contributions To: | | |
| a. Individuals/Persons Other Than Political Committees | 2,100.00 | 9,150.00 |
| b. Political Party Committees | 0 | 0 |
| c. Other Political Committees (such as PACs) | 0 | 0 |
| d. Total Contribution Refunds (Add a, b and c) ➤ | 2,100.00 | 9,150.00 |
| 29. Other Disbursements | 0 | 2,500.00 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 9,018.25 | 237,187.37 |
| 31. Total Federal Disbursements (subtract line 21 a II from line 30) ➤ | 9,018.25 | 237,187.37 |
| **III. Net Contributions/Operating Expenditures** | | |
| 32. Total Contributions (other than loans)(from line 11d) | 51,510.00 | 343,374.70 |
| 33. Total Contribution Refunds (from line 28d) | 2,100.00 | 9,150.00 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 49,410.00 | 334,224.70 |
| 35. Total Federal Operating Expenditures (add 21 a I and 21 b) ➤ | 1,418.25 | 11,037.37 |
| 36. Offsets to Operating Expenditures (from line 15) | 0 | 21.40 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | 67.03 | 11,015.97 |

SCHEDULE A — ITEMIZED RECEIPTS

For each category of the Detailed Summary Page: 1 — FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
American Academy of Ophthalmology, Inc. Political Committee (OPHTHPAC)

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Union Bank<br>50 California Street<br>San Francisco, CA 94109 | N/A / N/A | 10/31/93 | |
| Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest | Aggregate Year-to-Date > $ 2,001.32 | | 194.94 |
| **B. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Dean Witter Reynolds, Inc.<br>167 East Second Avenue<br>San Mateo, CA 94401 | N/A / N/A | 10/31/93 | |
| Receipt For: [ ] Primary [ ] General [X] Other (specify): Income Interest | Aggregate Year-to-Date > $ 359.99 | | 50.45 |
| **C. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: [ ] Primary [ ] General [ ] Other (specify): | Aggregate Year-to-Date > $ | | |
| **D. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: [ ] Primary [ ] General [ ] Other (specify): | Aggregate Year-to-Date > $ | | |
| **E. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: [ ] Primary [ ] General [ ] Other (specify): | Aggregate Year-to-Date > $ | | |
| **F. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: [ ] Primary [ ] General [ ] Other (specify): | Aggregate Year-to-Date > $ | | |
| **G. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: [ ] Primary [ ] General [ ] Other (specify): | Aggregate Year-to-Date > $ | | |

| | |
|---|---|
| SUBTOTAL of Receipts This Page (optional) | 245.39 |
| TOTAL This Period (last page this line number only) | 245.39 |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Provenzano MD*Richard J<br>140 Hospital Drive<br><br>Bennington VT 05201 | New England E Phy/Sg<br>PHYSICIAN | 10/07/93 | 250.00 | 250.00 |
| Harbin MD*Robert L<br>1825 Martha Berry Blvd<br><br>Rome GA 30165-1698 | Self-Employed<br>PHYSICIAN | 10/29/93 | 250.00 | 250.00 |
| Rubenstein MD*Jonathan B<br>Rush-Presbyterian Med Ctr<br>1725 West Harrison Street<br>Chicago IL 60612 | WILLIAMS E DEUTSCH M<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Arterberry MD*Joe F<br>Suite 110<br>224 East Broadway<br>Louisville KY 40202-2096 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 600.00 |
| Gross MD*Jay<br>Suite 3<br>1908 Santa Monica Boulevard<br>Santa Monica CA 90404 | OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Reader III MD*August L<br>Suite 800E Cedars-Sinai Tower<br>8631 West Third Street<br>Los Angeles CA 90048 | OPHTHALMOLOGIST | 10/25/93 | 300.00 | 300.00 |
| Roth MD*Larry M<br>521 Mt Auburn Street<br><br>Watertown MA 02172 | OPHTHALMOLOGIST | 10/27/93 | 1000.00 | 1000.00 |
| Peracha MD*M M<br>725 North Monroe Street<br><br>Monroe MI 48161-2936 | Eye Surgn's Monroe<br>OPHTHALMOLOGIST | 10/01/93 | 300.00 | 300.00 |
| | SUBTOTAL | | 3000.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Zweibel MD*Lawrence C<br>91 Maple Avenue<br><br>Smithtown NY 11787 | Self-Employed<br>PHYSICIAN | 10/25/93 | 300.00 | 300.00 |
| Kranias MD*George<br>Vitreo-Retinal Surgeons Inc<br>2230 Auburn Avenue<br>Cincinnati OH 45219 | OPHTHALMOLOGIST | 10/12/93 | 1000.00 | 1000.00 |
| Schoengarth MD*Lowell D<br>500 Keene Street<br><br>Columbia MO 65201 | Self-Employed<br>PHYSICIAN | 10/04/93 | 1000.00 | 1000.00 |
| Lobes Jr MD*Louis A<br>Suite 500<br>3501 Forbes Avenue<br>Pittsburgh PA 15213 | Retina Vitreous Cons<br>OPHTHALMOLOGIST | 10/05/93 | 300.00 | 300.00 |
| Chu MD*C Wing<br>17 East 72nd Street<br><br>New York NY 10021 | Self-Employed<br>PHYSICIAN | 10/29/93 | 250.00 | 250.00 |
| Burgess MD*Dean B<br>Suite 17413 East Pavilion<br>One Barnes Hospital Plaza<br>St Louis MO 63110 | OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Johnson MD*Donna L<br>#16-17<br>7141 South Jeffrey Boulevard<br>Chicago IL 60649 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 500.00 | 500.00 |
| Cupples MD*Howard P<br>Georgetown University Med Ctr<br>3800 Reservoir Road NW<br>Washington DC 20007 | GEORGETOWN UNIVERSITY<br>PHYSICIAN | 10/26/93 | 500.00 | 500.00 |
| | SUBTOTAL | | 4150.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Boldrey MD*Edwin E<br>Suite A<br>2512 Samaritan Court<br>San Jose CA 95124 | Self-Employed<br>PHYSICIAN | 10/27/93 | 300.00 | 300.00 |
| Clark MD*Gerald<br>Trover Clinic<br>Madisonville KY 42431 | Trover Clinic<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 600.00 |
| Lowe Jr MD*Reginald S<br>Suite 100<br>Hospital Doctors Building<br>Clarksville TN 37043 | Self-Employed<br>OPHTHALMOLOGIST | 10/05/93 | 1000.00 | 1000.00 |
| Fine MD*Stuart L<br>Scheie Eye Institute<br>51 North 39th Street<br>Philadelphia PA 19104 | Wilmer Institute<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 600.00 |
| Kraushar MD*Marvin F<br>600 South Avenue West<br>Westfield NJ 07090 | Self-Employed<br>PHYSICIAN | 10/04/93 | 300.00 | 300.00 |
| Von Glahn MD*Noel A<br>29927 West Six Mile Road<br>Livonia MI 48152 | OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Bergstrom MD*Terry J<br>WK Kellogg Eye Center Room 649<br>7000 Wall Street<br>Ann Arbor MI 48105-1994 | UNIV OF MICH<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 500.00 |
| Sugar MD*Alan<br>Kellogg Eye Center<br>1000 Wall Street<br>Ann Arbor MI 48105-1994 | Univ of Michigan<br>OPHTHALMOLOGIST | 10/29/93 | 100.00 | 250.00 |
| | SUBTOTAL | | 2900.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Berman MD*Martin B<br>29727 West Six Mile Road<br><br>Livonia MI 48152 | Livonia Ophths<br>OPHTHALMOLOGIST | 10/27/93 | 250.00 | 450.00 |
| May MD*Robert O<br>1992 McDowell Road<br><br>Jackson MS 39204 | Self-Employed<br>PHYSICIAN | 10/01/93<br>10/25/93 | 250.00<br>250.00 | 750.00 |
| Finkelstein MD*Elliot M<br>1371 Beacon Street<br><br>Brookline MA 02146 | Self-Employed<br>PHYSICIAN | 10/25/93 | 200.00 | 400.00 |
| Meissner MD*Richard H<br>Eye Physicians Omaha<br>4353 Dodge Street<br>Omaha NE 68131-2709 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Fellows Jr MD*Victor G<br>595 Buckingham Way<br><br>San Francisco CA 94132 | OPHTHALMOLOGIST | 10/04/93 | 500.00 | 500.00 |
| Rosenthal MD*Morton L<br>20 East Ninth Street<br><br>New York NY 10003 | Self-Employed<br>PHYSICIAN | 10/29/93 | 300.00 | 300.00 |
| Medow MD*Norman B<br>225 East 64th Street<br><br>New York NY 10021 | SELF<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Packer MD*Samuel<br>North Shore University Hosp<br>300 Community Drive/Ophth<br>Manhasset NY 11030 | North Shore Univ Hos<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 900.00 |
| | SUBTOTAL | | 2650.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Obstbaum MD*Stephen A<br>145 East 39th Street<br><br>New York NY 10016 | BARAS BARASCH OBSTBU<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Riegel MD*Byron W<br>2830 West Main Street<br><br>Visalia CA 93291-4391 | Self-Employed<br>PHYSICIAN | 10/29/93 | 1000.00 | 1300.00 |
| Marquardt MD*John L<br>466 South Trimble Road<br><br>Mansfield OH 44906 | Ohio Eye Assoc<br>OPHTHALMOLOGIST | 10/29/93 | 1000.00 | 1000.00 |
| Taylor Jr MD*Walter L<br>Suite 101-N<br>1200 First Colonial Road<br>Virginia Beach VA 23454 | Self-Employed<br>OPHTHALMOLOGIST | 10/12/93 | 400.00 | 700.00 |
| Dersani MD*Thomas A<br>612 University Avenue<br><br>Syracuse NY 13210 | Self Employed<br>OPHTHALMOLOGIST | 10/25/93 | 300.00 | 300.00 |
| Utrata MD*Peter J<br>303 East Town Street<br><br>Columbus OH 43215 | EYE SURGERY CENTER O<br>OPHTHALMOLOGIST | 10/27/93 | 1000.00 | 1000.00 |
| Hobson MD*Scott R<br>Suite 1115<br>3471 Fifth Avenue<br>Pittsburgh PA 15213 | PGH OCULOPLASTIC ASSC<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Wittpenn Jr MD*John R<br>Four Oldfield Lane<br><br>Mount Sinai NY 11766 | S U N Y AT Stony B<br>PHYSICIAN | 10/29/93 | 300.00 | 300.00 |
| | SUBTOTAL | | 4600.00 | |

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ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Schomer MD*Gary D<br>400 Avenue K SE<br><br>Winter Haven FL 33880 | OPHTHALMOLOGIST | 10/27/93 | 250.00 | 250.00 |
| Becker MD*Norbert Mathias<br>91N597 Hunter's Hill Drive<br><br>St Charles IL 60175 | SIMON EYE CARE ASSO<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Mancall MD*Erwin T<br>21 Woodland Street<br><br>Hartford CT 06105 | SELF EMPLOYED<br>OPHTHALMOLOGIST | 10/29/93 | 250.00 | 250.00 |
| Morris MD*Sheldon L<br>Suite 407<br>Crozer-Chester Prof Building<br>Upland PA 19013 | Self Employed<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Flanagan MD*Joseph C<br>256 Lankenau Medical Bldg East<br>Lancaster Avenue at City Line<br>Wynnewood PA 19096 | AVNESLEY FLANAGAN PI<br>OPHTHALMOLOGIST | 10/13/93 | 250.00 | 250.00 |
| Sellyei Jr MD*Louis F<br>890 Mill Street<br><br>Reno NV 89502 | Self-Employed<br>OPHTHALMOLOGIST | 10/25/93 | 500.00 | 500.00 |
| Beem MD*John W<br>206 South Sixth Avenue<br><br>West Reading PA 19611 | W Rdg Oph Associates<br>PHYSICIAN | 10/01/93 | 100.00 | 600.00 |
| Wingate Jr MD*Charles E<br>5 Coliseum Avenue<br><br>Nashua NH 03063 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| | SUBTOTAL | | 2250.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Marshall MD*Hubert A<br>Suite 105<br>408 East Market Street<br>Charlottesville VA 22901 | OPHTHALMOLOGIST | 10/12/93 | 250.00 | 250.00 |
| Torczynski MD*Elise<br>Apartment 1203<br>1755 East 55th Street<br>Chicago IL 60615-5972 | Self employed<br>PHYSICIAN | 10/13/93 | 200.00 | 700.00 |
| Schimazi MD*V Jacob<br>265 Waterman Street<br>Providence RI 02906 | Self-Employed<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Ahmad MD*Arlene S<br>223 West Main Street<br>Boonton NJ 07005 | Self-Employed<br>OPHTHALMOLOGIST | 10/01/93 | 1000.00 | 1000.00 |
| Fier MD*Robert H<br>1441 East Ocean Boulevard<br>Stuart FL 34996-2646 | Fier Eyecare & Surg<br>OPHTHALMOLOGIST | 10/29/93 | 100.00 | 400.00 |
| Griffith MD*Frank H<br>1493 East Iron Avenue<br>Salina KS 67401 | SELF<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Hampton MD*G Robert<br>Ret-Vit Surgeons of Central NY<br>3107 East Genesee Street<br>Syracuse NY 13224-1646 | Delaney & Terrs MD<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Kivlin MD*Jane D<br>Eye Institute<br>8700 West Wisconsin Avenue<br>Milwaukee WI 53226-3595 | Self-Employed<br>OPHTHALMOLOGIST | 10/07/93 | 300.00 | 300.00 |
| | SUBTOTAL | | 2750.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| McDonald MD*Marguerite B<br>LSU Eye Center<br>Suite B/2020 Gravier Street<br>New Orleans LA 70112 | LSU EYE CENTER<br>PHYSICIAN | 10/29/93 | 300.00 | 300.00 |
| Mein MD*Calvin E<br>Suite 323<br>9499 Medical Drive<br>San Antonio TX 78229 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 600.00 |
| Cheng MD*Harvey S<br>Suite 204<br>501 North 17th Street<br>Allentown PA 18104 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 250.00 | 250.00 |
| Lederer Jr MD*Charles M<br>Suite 310<br>6650 Troost Avenue<br>Kansas City MO 64131-1249 | Self-Employed<br>PHYSICIAN | 10/25/93 | 300.00 | 400.00 |
| Griggs Jr MD*Edward A<br>45 Ludlow Street<br><br>Yonkers NY 10705 | Self-Employed<br>PHYSICIAN | 10/08/93 | 150.00 | 300.00 |
| Leveckis MD*Dapute M<br>Burns Clinic Med Center<br>560 West Mitchell<br>Petoskey MI 49770 | Burns Clinic Med Ctr<br>PHYSICIAN | 10/25/93 | 300.00 | 300.00 |
| Sutton MD*Gregory E<br>6900 L Street<br><br>Lincoln NE 68510 | Sutton Skin & Eye<br>OPHTHALMOLOGIST | 10/25/93 | 500.00 | 500.00 |
| Basham MD*Arthur A<br>212 Oak Meadow Drive<br><br>Los Gatos CA 95030 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 250.00 | 250.00 |
| | SUBTOTAL | | 2350.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES

SCHEDULE A

FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Sappenfield MD*David Luther<br>McPherson Hospital<br>1110 West Main Street<br>Durham NC 27701 | MCPHERSON HOSP<br>OPHTHALMOLOGIST | 10/25/93 | 250.00 | 300.00 |
| Parke II MD*David W<br>Dean A McGee Eye Institute<br>608 Stanton L Young Blvd<br>Oklahoma City OK 73104-5065 | Baylor Coll of Med<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Duker MD*Jay S<br>New England Eye Center<br>750 Washington Street/Box 450<br>Boston MA 02111 | Wills Eye Hospital<br>PHYSICIAN | 10/29/93 | 300.00 | 300.00 |
| Athineos-Schinazi MD*Helen I<br>265 Waterman Street<br><br>Providence RI 02906 | Self-Employed<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Blackman MD*M J<br>Suite 326<br>3301 New Mexico Avenue NW<br>Washington DC 20016 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Robinson MD FACS*David<br>1201-F Savannah Road<br><br>Lewes DE 19958-1513 | Self-Employed<br>PHYSICIAN | 10/29/93 | 250.00 | 250.00 |
| Hoffman MD*W Jay<br>1805 East 19th Street<br><br>The Dalles OR 97058 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Rohdit MD*Philip C<br>Alliance Eye Clinic<br>985 South Sawburg Road<br>Alliance OH 44601 | Alliance Eye & Ear<br>OPHTHALMOLOGIST | 10/01/93 | 250.00 | 450.00 |
| | SUBTOTAL | | 2250.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Sternberg Jr MD*Paul<br>Emory Univ Eye Clinic<br>1327 Clifton Road NE<br>Atlanta GA 30322 | Emory University<br>OPHTHALMOLOGIST | 10/04/93 | 300.00 | 300.00 |
| Rinkoff MD*Jeffrey S<br>Retina Vitreous Consultants<br>3501 Forbes Avenue/Suite 500<br>Pittsburgh PA 15213 | RETINA VITREOUS CONS<br>OPHTHALMOLOGIST | 10/25/93 | 250.00 | 250.00 |
| Ahmad MD*Maqbool<br>PO Box 1178<br>Marion IL 62959 | Self-Employed<br>OPHTHALMOLOGIST | 10/08/93 | 500.00 | 500.00 |
| Steinert MD*Roger F<br>Ophthalmic Consultants<br>50 Staniford Street/6th Floor<br>Boston MA 02114 | CORNEA ASSOCIATES<br>OPHTHALMOLOGIST | 10/25/93 | 300.00 | 300.00 |
| Asbell MD*Penny A<br>Mt Sinai Med Ctr ANN 22-12<br>One Gustave Levy Pl Box 1183<br>New York NY 10029-6574 | MT SINAI<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Hopelow MD*Stanley M<br>Suite 122<br>5400 Balboa Boulevard<br>Encino CA 91316 | Self-Employed<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 900.00 |
| Weinstein MD*Gary S<br>Suite 1014 Investment Bldg<br>239 Fourth Avenue<br>Pittsburgh PA 15222 | Self-Employed<br>PHYSICIAN | 10/29/93 | 300.00 | 300.00 |
| Barnak MD*Leonard G<br>9000 Crosswood Court<br>Burke VA 22015 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/27/93 | 200.00 | 300.00 |
| | SUBTOTAL | | 2450.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Williams MD*Robert D<br>Valley Eye & Laser Center<br>4011 Talbot Road South Ste 210<br>Renton WA 98055 | OPHTHALMOLOGIST | 10/25/93 | 500.00 | 500.00 |
| Sakauye MD*Carolyn B<br>Eye Medical Clinic of Fresno<br>1122 S Street<br>Fresno CA 93721-1498 | Eye Medical Clinic<br>PHYSICIAN | 10/27/93 | 200.00 | 700.00 |
| Lamping MD*Kathleen A<br>Suite 140<br>5611 South Green Road<br>South Euclid OH 44121 | EENT Inc<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 600.00 |
| Donnelly MD*Edwin M<br>Suite 115<br>3191 Howell Mill Road<br>Atlanta GA 30327 | OPHTHALMOLOGIST | 10/25/93 | 250.00 | 250.00 |
| Aguilar MD*Gary L<br>Suite 530<br>909 Hyde Street<br>San Francisco CA 94109 | SELF<br>OPHTHALMOLOGIST | 10/25/93 | 250.00 | 250.00 |
| Nelsen MD*Philip T<br>Retina Consultants Suite E<br>Jobst Tower/2109 Hughes Drive<br>Toledo OH 43606 | Self-Employed<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Van Meter MD*Woodford S<br>1780 Nicholasville Rd Ste 205<br>Lexington KY 40503 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/27/93 | 300.00 | 300.00 |
| Auerbach MD*Larry A<br>125 East Lake Cook Road<br>Buffalo Grove IL 60089 | SELF<br>OPHTHALMOLOGIST | 10/27/93 | 500.00 | 500.00 |
| | SUBTOTAL | | 2600.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Solish MD*Alfred M<br>Suite 321<br>9735 Wilshire Boulevard<br>Beverly Hills CA 90212 | Self-Employed<br>PHYSICIAN | 10/25/93 | 300.00 | 300.00 |
| Lau MD*Gary J<br>2330 East High Street<br>Springfield OH 45503 | Self-Employed<br>OPHTHALMOLOGIST | 10/01/93 | 250.00 | 250.00 |
| Meltzer MD*David M<br>#109 LBG<br>8210 Walnut Hill Lane<br>Dallas TX 75231 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/07/93 | 300.00 | 300.00 |
| Yee MD*Mei-Ling A<br>Suite 208<br>142 Palisades Avenue<br>Jersey City NJ 07306 | Self-Employed<br>OPHTHALMOLOGIST | 10/25/93 | 300.00 | 300.00 |
| Sheppard Jr MD*John Daniel<br>Suite 403<br>Medical Tower<br>Norfolk VA 23507 | OPHTHALMOLOGIST | 10/25/93 | 300.00 | 300.00 |
| Arturi MD*Frank C<br>559 Anderson Avenue<br>Cliffside Park NJ 07010 | Self-Employed<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Flohr MD*Michael J<br>Thornapple Ophthalmology Assoc<br>915 West Green Street/Ste 101<br>Hastings MI 49058 | Self-Employed<br>OPHTHALMOLOGIST | 10/25/93<br>10/27/93 | 1000.00<br>1000.00 | 2000.00 |
| Waeltermann MD*Joanne M<br>1011 Frederick Road<br>Catonsville MD 21228 | Self-Employed<br>PHYSICIAN | 10/29/93 | 250.00 | 325.00 |
| | SUBTOTAL | | 4000.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Margulies MD*Linda J<br>712 Francis Drive<br><br>Lafayette CA 94549-1729 | VA Hosp Martinez<br>PHYSICIAN | 10/27/93 | 150.00 | 300.00 |
| Murphy MD*Forrest P<br>Talmadge Eye Center<br>4953 Euclid Avenue<br>San Diego CA 92115 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/01/93 | 300.00 | 300.00 |
| Graven MD*Paul W<br>Suite 7<br>4859 Dover Center Road<br>North Olmsted OH 44070-3102 | Fairview Eye Center<br>OPHTHALMOLOGIST | 10/08/93 | 1000.00 | 1000.00 |
| Collado MD*Irvin<br>Calle Dr Nelson Perea #16<br><br>Mayaguez PR 00680 | OPHTHALMOLOGIST | 10/29/93 | 300.00 | 600.00 |
| Harkins MD*Lori A<br>731 North Custer Avenue<br><br>Grand Island NE 68803 | SELF-EMPLOYED<br>OPHTHALMOLOGIST | 10/27/93 | 500.00 | 500.00 |
| Cheng MD*Kenneth Paul<br>3518 Fifth Avenue<br><br>Pittsburgh PA 15213-3188 | Childrens Hosp Pitts<br>OPHTHALMOLOGIST | 10/29/93 | 300.00 | 300.00 |
| Tipperman MD*Richard<br>150 Lankenau East Medical Bldg<br><br>Wynnewood PA 19096 | WILLS EYE<br>OPHTHALMOLOGIST | 10/29/93 | 150.00 | 300.00 |
| Ittarius MD*Scott G<br>2001 South Seventh Street<br><br>Rapid City SD 57701 | OPHTHALMOLOGIST | 10/28/93 | 250.00 | 250.00 |
| | SUBTOTAL | | 2950.00 | |

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CONTRIBUTIONS FROM INDIVIDUALS OTHER THAN POLITICAL COMMITTEES
SCHEDULE A
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | EMPLOYER/OCCUPATION | DATE | RECEIPT AMOUNT | YTD AMOUNT |
|---|---|---|---|---|
| Alexander MD INC*Julian P<br>1056 Washington Street<br>Red Bluff CA 96080 *1 | OPHTHALMOLOGIST | 10/01/93 | 500.00 | 500.00 |
| Birkenkamp*Kristin<br>305 North Sanborn<br>Mitchell SD 57301 | OPHTHALMOLOGIST | 10/08/93 | 250.00 | 250.00 |
| Macke*Susann<br>6712 Cooper Chapel Road<br>Louisville KY 40229 | OPHTHALMOLOGIST | 10/12/93 | 300.00 | 300.00 |
| Beth Israel Medical Center<br>Ophthalmology Dept<br>317 East 17th Street<br>New York NY 10003 *1 | OPHTHALMOLOGIST | 10/12/93 | 1000.00 | 1000.00 |
| | SUBTOTAL | | 2050.00 | |
| | *** TOTAL *** | | 90950.00 | |

*1 Corp funds RETURNED, SEE Sch B

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SCHEDULE B

# ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 28a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN ACADEMY OF OPHTHALMOLOGY, INC., POLITICAL COMMITTEE (OPHTHPAC)

| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Julian P. Alexander MD INC<br>1056 Washington Street<br>Red Bluff CA 96080 | Return Corp Funds<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 10/31/93 | $500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Beth Israel Medical Center<br>P.O.Box 790<br>Cooper Station<br>New York, NY 10226 | Purpose of Disbursement<br>Return Corp Funds<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year)<br>10/31/93 | Amount of Each Disbursement This Period<br>$1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

SUBTOTAL of Disbursements This Page (optional) ..... 1,500.00

TOTAL This Period (last page this line number only) ..... 1,500.00

SCHEDULE B — ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 21(a) 6

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NAME OF COMMITTEE (In Full)

American Academy of Ophthalmology, Inc. Political Committee (OPHTHPAC)

| | Purpose of Disbursement / Disbursement for | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| A. Union Bank<br>50 California Street<br>San Francisco, CA 94109 | Mastercard/Visa fees<br>[ ] Primary [ ] General [X] Other (specify) YTD | 10/31/93 | 89.01 |
| B. American Express<br>2423 E. Lincoln Drive<br>Phoenix, AZ 85016 | Merchant fees<br>[ ] Primary [ ] General [X] Other (specify) YTD | | |
| C. Union Bank<br>50 California Street<br>San Francisco, CA 94109 | Banking fee-analysis<br>[ ] Primary [ ] General [X] Other (specify) YTD | | |
| D. AAO<br>655 Beach Street<br>San Francisco CA 94109 | Clerical Assist<br>[ ] Primary [ ] General [ ] Other (specify) | 10/31/93<br>10/31/93 | 160.41<br>888.83 |
| E. Rent-A-Computer<br>4701 Patrick Henry Drive<br>Santa Clara CA 95054 | Computer Rental<br>[ ] Primary [ ] General [ ] Other (specify) | 10/31/93 | 280.00 |
| F. | [ ] Primary [ ] General [ ] Other (specify) | | |
| G. | [ ] Primary [ ] General [ ] Other (specify) | | |
| H. | [ ] Primary [ ] General [ ] Other (specify) | | |
| I. | [ ] Primary [ ] General [ ] Other (specify) | | |

SUBTOTAL of Disbursements This Page (optional) ..... 1418.25

TOTAL This Period (last page this line number only) ..... 1418.25

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CONTRIBUTIONS TO FEDERAL CANDIDATES AND OTHER POLITICAL COMMITTEES
SCHEDULE B
FROM 10/01/93 TO 10/31/93

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| NAME AND ADDRESS | DISBURSEMENT PURPOSE | DATE | AMOUNT |
|---|---|---|---|
| DIM CARDIN FOR CONGRESS<br>PO BOX 65056<br>BALTIMORE MD 65056 | HOUSE /3RD /MD<br>1994/PRIMARY | 10/12/93 | 500.00 |
| BEN CARDIN FOR CONGRESS<br>PO BOX 65056<br>BALTIMORE MD 65056 | HOUSE /3RD /MD<br>1994/PRIMARY | 10/12/93 | 500.00 |
| PETER BLUTE FOR CONGRESS<br>COMMITTEE<br>542 W MAIN STREET<br>SHRIWSBURY MA 01545 | HOUSE /3RD /MA<br>1994/PRIMARY | 10/21/93 | 1000.00 |
| MARTIN FROST CMPGN COMM<br>555 NEW JERSEY AVENUE NW<br>WASHINGTON DC 20001 | HOUSE /24TH/TX<br>1994/PRIMARY | 10/15/93 | 500.00 |
| MALONEY FOR CONGRESS<br>216-7TH STREET SE<br>WASHINGTON DC 20003 | DIST REFUNDMENT<br>HOUSE /14TH/NY<br>1992/GENERAL | 10/07/93 | 2000.00 |
| HEFNER FOR CONGRESS<br>COMMITTEE<br>PO BOX 3016<br>CONCORD NC 28025 | HOUSE /8TH /NC<br>1994/PRIMARY | 10/19/93 | 1000.00 |
| | SUBTOTAL | | $5500.00 |
| | *** TOTAL *** | | 5500.00 |

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Federal Election Commission

# ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

| | | |
|---|---|---|
| ☐ | Hand Delivered | DATE OF RECEIPT |
| ☐ | First Class Mail | POSTMARKED |
| ☑ | Registered/Certified Mail | POSTMARKED 11-10-93 |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House Office of Records and Registration | DATE OF RECEIPT |
| ☐ | Received from the Senate Office of Public Records | DATE OF RECEIPT |
| ☐ | Other (Specify): | POSTMARKED and/or DATE OF RECEIPT |

SMN
PREPARER

11-16-93
DATE PREPARED

FEC FORM 70-2 (12/92)

93U38562734